Lesson 72 - Rheumatic Diseases

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1. Introduction

"Rheumatism" is derived from the Greek word rheumatismos, that designated mucus (catarrh) as an evil humor that was thought to flow from the brain to the joints and other portions of the body, producing pain. Studies have shown that an alteration of an important constituent of the joint mucin (the mucopolysaccharide: hyaluronic acid) occurs in some of the "rheumatic diseases." The rheumatic diseases are those conditions where pain and stiffness of some portion of the musculoskeletal system are prominent. These include diseases of connective tissue. The connective tissue diseases exist because of unhealthful living habits. Toxic matter that was not eliminated by the body is often stored in these tissues.

Arthritis is the general term used when the joints themselves become inflamed. Sufferers of arthritis experience pain, stiffness, and swelling in their joints. Many people become crippled. In the United States, more than 31 million persons of all ages and backgrounds suffer from this disease.

Many, different forms of joint diseases are distinguished. Physicians say that some forms of arthritis are caused by known agents, others from unknown factors. All disease is abnormal. A healthy person does not suddenly become stricken with arthritis or any other disease. The factors behind all forms of rheumatic diseases are known. That is, there must be an underlying toxicosis before the symptoms of arthritis appear. Many forms of acute arthritis pass into a subacute or chronic state because of drug therapy and continued unhealthful lifestyle.

Most physicians categorize arthritis into one of five major groups:

1. Infections caused by a specific microorganism.
2. Cases that are possibly infectious but of unproved etiology.
3. Cases representing degenerative forms of joint diesease (sometimes termed arthroses).
4. Cases in which the arthritis results from direct trauma to the joint (chondromalacia).
5. Cases of metabolic arthritis (e.g., gout).

The above five groups will be discussed in this lesson and refuted. They are all based on erroneous concepts concerning the nature of disease.

2. Structure And Function Of Joints

The joints allow controlled and almost frictionless movement. The human skeletal system (the bones and joints) provide structural support and protection to vital parts, yet allow sufficient directed movement for the functions of locomotion and the ability to grasp or seize objects.

The joint space, articular cartilage, and synovial membrane allow the wide ranges of motion necessary for these functions. The synovial joints comprise the majority of the body's moveable joints. On each end of the bones near a joint there is a thin plate of dense bone. Tightly attached to these bony plates are the hyaline articular cartilages. These are specialized structures made up of connective tissue that acts as the bearing and gliding surfaces of the joints. In the joint cavity there is a space that contains the synovial fluid. The ligaments and muscles around the joint offer support for the joint. Normal synovial fluid is clear, pale yellow, and viscous. It is normally present in very small amounts. One to four milliliters is found in the human knee, and less in smaller joints. Its purpose is lubrication of the joint. The synovial membrane surrounds the weight-bearing cartilage and secretes the synovial fluid. The synovial tissue does not have a structural barrier between its blood vessel space. Therefore, substances from the blood are easily carried directly into the joint fluid. All of the many impurities that circulate in the blood at various times due to toxins arising from fermentation or putrefaction of food in the stomach due to improper food or combinations of food; food additives and chemicals; or uneliminated metabolic wastes, may pass directly into the joints from the blood. Once inside the joints, these substances may precipitate arthritis by irritating the inner lining of the joints.

Proper lubrication is vital to the function of the joints since it serves to keep the opposing cartilage surfaces from touching each other. If the cartilage surfaces touch, immediate destruction begins.

The lubrication fluid must also have the right chemical makeup. The fluid consists of large and small molecules which change constantly in their concentrations. As weight is put on the joint, the smaller molecules are pushed into the cartilage leaving behind the larger molecules of hyaluronic acid to bear the weight and to keep the cartilage surfaces from touching.

A molecule consisting of carbohydrate and protein is responsible primarily for joint lubrication. In the cartilage, the protein structure is the critical component of these molecules since its digestion by enzymes called proteases results in an "uncoupling" of the proteoglycan (combination of protein and carbohydrate) from the cartilage and its subsequent loss. This loss from the cartilage results in a stiffer material and is more easily damaged by wear and tear. These proteases are activated at acid pH.

Anything that tends to make the joints more acid will cause an increased rate of destruction by speeding the removal of the proteoglycans from the cartilage. Lack of exercise, eating refined foods or sugar and meats tend to make the joints more acid.

3. Types Of Arthritis

3.1 Osteoarthritis

Osteoarthritis is a noninflammatory disorder of the moveable joints. Those joints most frequently affected are the hands, hips, knees, lower back, and neck. This disease is characterized by deterioration

and abrasion of articular cartilage (that cartilage which covers the ends of the bones forming the joint) and also by formation of new bone at the joint surfaces. Severe disability may result, especially if the conditions have progressed far.

People with osteoarthritis suffer pain in the afflicted area and may feel a grating sensation when they move. Knobs of bone and of hardening bits of cartilage may develop in the joint, causing swelling and deformity.

3.2 Rheumatoid Arthritis

Rheumatoid arthritis is a systemic inflammatory disease. Being systemic, all the organs of the body are affected (as they are in all diseases), but the outstanding feature is the progressive deformity of the involved joints. Usually more than one joint is diseased and it is symmetrical; that is, if one hip is involved, the other usually is also. It usually begins in the small joints of the hands and feet, but it commonly affects the wrists, elbows, ankles, hips, knees, and spine. The synovial membrane becomes inflamed and develops into a mass of swollen and inflamed tissue. It becomes what is known as a pannus and it is thought that this is what eventually destroys the articular cartilage. It also extends to the joint capsule that surrounds the joint and the supporting ligaments and weakens the entire joint. It eventually destroys the articular cartilage, then the bone. In the later stages of the disease, the articular surface is eroded and the joint space is obliterated. In the final stages of rheumatoid arthritis, adhesions of fibrous tissue or bony ankylosis prevent the joint from moving.

3.3 Bursitis

Bursae are closed sacs, lined with a cellular membrane resembling synovium. They serve to facilitate motion of tendons and muscles over bony prominences. Inflammation of a bursa, or bursitis may occur in any part of the body where bursae exist (there are approximately 78 bursae on each side of the body), but most frequently occurs in the shoulder. Bursitis does not necessarily always involve a joint but because it often does, it is considered here.

Repeated irritation of certain areas where bursae already exist are contributing factors in what is called "traumatic bursitis." The predominant cause is toxicosis. "Tennis elbow" is a common example of overuse and stress contributing to this condition. Couple this with enervation from poor living habits and the foundation is laid for the development of bursitis.

3.4 Gout

Gout sufferers experience repeated flare-ups of painful swelling. The bunion joint, which connects the big toe and the foot, is affected first in most cases. Gout is associated with the presence of too much uric acid in the blood due to improper diet such as meat eating. Sugar and sugar-starch combinations are also contributing factors. Uric acid takes the form of needle-shaped crystals in the joints. These crystals irritate the surrounding areas and cause severe pain.

3.5 Chondromalacia of the Knee

Chondromalacia is a softening of a cartilage. It most often occurs in athletes and is frequently seen in runners and competitive cyclists. It is a softening, fissuring, and degenerative process of the articular surface of the knee cap. It is thought to be due primarily to overuse and stress to the joint. While this is a contributing factor, the predominant cause is toxicosis.

There are many other forms of arthritis, but the above-named ones are those most often experienced by the majority of arthritis sufferers.

4. Why You Have Arthritis

Despite the many forms that arthritis may have, the underlying cause remains the same for all types. A joint may be injured and the development of arthritis follows. The joint didn't heal perfectly but remained stiff and painful with the end result being a weakened, or even crippled, limb.

The reason for the failure of the injured joint to heal is that the individual is already toxemic and the stage is set for the development of arthritis. Chondromalacia develops in athletes whose activities place a great strain on their joints, although it is not likely that these strains do more than determine the location of the development. The excesses in eating, especially wrong combinations and refined foods, for which athletes are noted, are the more likely causes.

Arthritis may develop at any season of the year in any climate. In many people, the cold weather seems to make the symptoms worse but this does not indicate that the cold, damp weather is the cause of the arthritis. This may be a secondary factor but often during the winter months, people tend to stay indoors, depriving themselves of fresh air and eating larger amounts of richer foods. These influences produce enervation and check excretion, resulting in toxicosis.

4.1 Poor Eating Habits

4.1.1 Uric Acid in Flesh Foods

Arthritis is often associated with uric acid poisoning. Flesh-eating animals secrete hydrochloric acid about twelve times as strong as that of humans. Carnivores also have an enzyme called uncase, that breaks down uric acid into allantoin. Man does not possess this enzyme. Vegetable proteins, including fruits and nuts, contain enough carbohydrates to make this enzyme unnecessary. Beef contains about fourteen grains of uric acid per pound. If you are eating meat, you are consuming a lot of this poisonous end product without having the means of breaking it down and disposing of it. It is therefore deposited in tissues and can readily be carried into the tissues of the joints where they accumulate along with other toxins.

4.1.2 Purines in Food

Purines are catabolized to uric acid in the body. Besides flesh foods, other foods that contain a significant amount of purine include dry beans, dry peas, lentils, spinach, sugar, cereals, bread, eggs, cheese, and milk. Below is a table that indicates the amount of purines in certain foods.

Group A: High concentrations (150-1000 mg per 100 grams)

Liver	Sardines
Kidney	Meat extracts
Sweetbreads	Consomme
Brains	Gravies

Heart	Fish roes
Anchovies	Herring

Group B: Moderate amounts (50-150 mg. per 100 grams)

Meat, game, and fish other than those in Group A	
Fowl	Asparagus
Lentils	Mushrooms
Whole grain cereals	Spinach
Beans, dry	Peas, dry

Group C: Very small amounts

Milk	Coffee
Cheese	Tea
Eggs	Chocolate
Fats*	Carbonated beverages

Refined cereals, spaghetti and macaroni, sugars and sweets, tapioca, yeast

*Fats interfere with the urinary excretion of urates and thus should be limited so as not to interfere with excretion of uric acid.

4.1.3 Sugar-Starch and Starch-Protein Combinations

Members of the legume family consist of a protein-starch combination. This combination is handled poorly by the body resulting in putrefaction. The end result is the formation of many toxins that contribute to toxicosis (the underlying factor in all arthritis). This is in addition to the formation of uric acid.

All refined sugars including white sugar, honey, molasses, maple syrup should not be included in the diet. They are unbalanced and "borrow" needed minerals from the bones and tissues. This is a contributing factor in osteo-arthritis where a degeneration of bone is evident. In addition to this, many toxic byproducts from the refinement process are found in these products that also contribute to toxicosis.

All cereals, including grains and bread, are not digested efficiently since humans are not biologically equipped to deal with large amounts of starches. We do possess the enzyme ptyalin in the saliva and starch digestion will begin if food is chewed proper. However, this enzyme will not be secreted if the starch food is combined with protein foods such as bread and peanut butter or cereal and milk. The starch is not digested at all and *fermentation* occurs in the digestive tract.

Sugar-starch combinations will also result in fermentation. As in protein-starch combinations, when sugar is eaten with starches such as bread and jelly or fruit with cereal, no ptyalin is secreted for starch digestion. Monosaccharides and disaccharides ferment more quickly than the polysaccharides (in starches). No digestion of sugars takes place in the mouth or stomach. The sugars are delayed in the stomach awaiting the digestion of starch and fermentation is the inevitable result.

Toxins resulting from fermentation of starches and sugars, and putrefaction of proteins, enter the bloodstream. Some are eliminated by the body in the urine or through other channels and some toxins are deposited in the tissues such as the connective tissues of joints and muscles. The stage is now set for arthritic diseases.

4.2 Enervating Habits

Any enervating habit such as smoking, alcohol, coffee drinking, etc. contributes to toxicosis and may result in arthritis.

It is known that cigarette smoke contains approximately one to five percent carbon monoxide (a poisonous gas) and the concentration of this gas increases as the cigarette burns down. The carbon monoxide combines with hemoglobin in the blood to form a union called carboxy-hemoglobin (COHb). Heavy cigarette smokers reach levels of five to fifteen percent COHb concentrations. The nicotine in the tobacco is also a deadly poison. These agents, together with many other poisonous products found in tobacco, contribute to overall toxicosis. Some of these toxins are inevitably deposited in the joints.

Alcohol results in damage to all tissues where it comes in contact. The presence of this substance in the blood results in enervation and toxicosis of all organs and tissues in the entire body. The ability of the body to heal and eliminate normal metabolic waste products is greatly reduced and degenerative diseases result when such habits are continued.

Caffeine in coffee, cocoa, and soft drinks results in stimulation of the central nervous system and impairment of all bodily functions. It has a deterimental effect on the entire endocrine system and has been proven to alter release of certain hormones which are associated with arthritic conditions.

4.3 Lack of Exercise

While arthritis is frequently observed among athletes, a lack of exercise may also contribute to its causation. It is impossible to obtain optimum health without adequately meeting the normal needs of life. A sedentary lifestyle lowers the tone and functioning vigor of the body. If you are inactive, your circulation will be sluggish. This prevents normal tissue renewal and nutrition. The ground is thus prepared for the development of disease (a healing crisis).

4.4 Insufficient Sleep

Only a vital organism can perform all physiological functions with the utmost efficiency. If you get insufficient rest and sleep, all bodily functions become sluggish. This enervated condition always leads to toxicosis. Sleep is a great restorer of vitality and is essential for our general well-being. Rest is the means of restoring normal nerve energy—rest of the body and mind. Physiological rest (fasting) is the surest, best, and most satisfactory means of promoting the excretion of accumulated toxins.

4.5 Fresh Air and Sunshine

Respiration involves the exchange of oxygen and carbon dioxide. The body rids itself of a poisonous waste product (carbon dioxide) and takes in oxygen. Oxygen is required for all cellular functions and if this air is impure, our cells will be correspondingly contaminated. It is important that our homes are well-ventilated so there is a constant flow of fresh air from outdoors. Stay away from smoke-filled rooms as much as possible. This is also harmful, even if you yourself don't smoke.

A daily walk in the fresh air and sunshine is a healthful activity. Besides the vitamin D that is synthesized in the skin from the sunlight, being outdoors in the sun (even for short intervals) is very beneficial. Research is still being done on this subject and details concerning all the benefits of sunlight still need to be discovered. However, this is one component of healthful living that should not be neglected.

4.6 Emotions and Stress

Emotions and stress are physiological occurrences. Under a stressful situation, the body responds by initiating a series of hormones to maintain stability. Repeated stress could exhaust this homeostatic mechanism and the entire endocrine system may be affected. The adrenals secrete anti-inflammatory hormones. If the adrenals were not performing normally, there would be a lack of this and other hormones in the body. This could lead to many abnormal conditions throughout the body and arthritis is one possible outcome.

5. Treatments

There are many different treatments given to arthritis sufferers. Most involve drug therapy, some involve massage, whirlpool baths, herbs, or superstitious practices which have no beneficial effects.

5.1 Aspirin and Nonsteroidal Drugs

The nonsteroidal anti-inflammatory drugs are agents that suppress the signs and symptoms of inflammation. Examples include aspirin, phenylbutazone, indomethacin, ibuprofen, fenoprofen, anproxen, and toletin. These drugs are totally ineffective for arthritis. While the pain may be somewhat lessened during their use, the symptoms return as soon as they are discontinued. Meanwhile, damage to the joints continues to occur while these drugs are being administered and no good has been accomplished.

While these drugs have no ability to heal, their use can result in general adverse effects throughout the entire body. This accounts for their so-called "side effects" which are really general effects. They are poisons that contribute to arthritis and their use makes the disease worse.

5.2 Corticosteroids

Glucocorticoids are a class of naturally-occurring adrenal corticosteroid hormones which are so named because of characteristic effects on the intermediary metabolism of glucose. These steroids are often manufactured in the laboratory or extracted from animals and injected into the joints of arthritis sufferers for their anti-inflammatory properties.

Inflammation is associated with most arthritic conditions. But do we want to suppress or halt inflammation? When you suppress inflammation, you are also stopping a healing process. Physicians will tell you that there is no "cure" for arthritis and they are correct. However, if the arthritis has not progressed to the point where bones become fused, the body can and does heal when the correct conditions are provided.

Administration of glucorticoids produces systemic effects. Mechanisms throughout the entire body are adversely affected and no good ever comes from this practice.

Mark Bricklin, author of *The Practical Encyclopedia of Natural Healing*, cites a case of a lady who had been on corticosteroid medication for a number of years. She bumped her arm against a table and discovered a few days later that she had broken a bone. At this point, her doctor informed her, "Well, that's what happens when you take corticosteroids for a long time. Your bones go." This is a common effect of this drug which results in calcium wasting from the bones.

There have also been cases of diabetes-like increases in blood sugar, of hairy growths on the faces of women, and rounding of the face and watery accumulations in children and adults, of high blood pressure, skin eruptions, emotional upsets, even giddy gaiety or depression of manic mental illness. These effects disappear when the hormone is stopped.

5.3 Other Therapies

Other treatments have been used for arthritis including massage, orthopedic shoes, megavitamins, mineral supplements, hypnosis, acupuncture, alfalfa, and many more. Not one of these therapies are beneficial. The underlying cause of this abnormal condition has not been corrected. The unhealthful diet and other contributing factors in toxicosis should be corrected so that the body can proceed in healing. Only then can a healthy state be restored.

6. Erroneuous Theories

As stated earlier, most physicians categorize arthritis into one of five major groups:

1. Infectious cases caused by a specific microorganism.
2. Cases that are possibly infectious but of unproved etiology.
3. Cases representing degenerative forms of joint disease (sometimes termed arthroses).
4. Cases in which the arthritis results from direct trauma to the joint (e.g., chondromalacia).
5. Cases of metabolic arthritis (e.g., gout).

The first two groups are based on the germ theory of disease. Although bacteria is associated with different diseases, they do not cause that disease. All disease is a vital effort on the part of the organism to heal. It is a bodily response undertaken in order to correct conditions that are harmful. When toxicosis exists and threatens the well-being of the organism, the body responds by eliminating those toxins and the symptoms of disease are felt. Bacteria are present to "clean up" decaying tissues, cells, toxins, etc., and are a useful part of this healing process. Arthritis is not a condition that is inflicted upon people in an indiscriminate manner by bacteria or viruses. It is a condition that has developed within the body due to unhealthful living practices.

The third group consists of degenerative forms of joint diseases that would include osteoarthritis and rheumatoid arthritis. When you persist in unhealthful living habits and suppress symptoms of disease with drugs or other means, degenerative diseases result. According to your particular diathesis, you may

develop arthritis, heart disease, kidney disease, etc. Even though the various types of arthritis are different, the cause remains the same for all forms. Accumulation of toxins irritates and weakens the membranes and tissues in the joint. Irritants or toxic substances degenerate cartilage. Then the body deposits, through a process of ossification, mineral salts in the joints. These salts are mostly calcium urates, created by the body's neutralization of uric acid with its own calcium. Calcium is thus depleted from the bones and wasting is seen. Mineral deposits in these joints harden and the final result would be fusion of the entire joint.

The fourth group consists of arthritis resulting from direct trauma to a joint. In a healthy individual, arthritis would most likely not occur due to use, such as in running. The joints must first be weakened by toxic accumulations and mineral deposits. The trauma then initiates the onset of the disease. If a joint would be greatly overworked, as in a series of marathons, inflammation may occur. However, if the individual were healthy, healing would occur after resting the joint involved, and there would be no lasting adverse effects.

The fifth group consists of metabolic disorders. Gout is a disease that is associated with high amounts of uric acid in the blood. It is also associated with high amounts of uric acid in the urine. The physiology books will tell you that this is common and quite innocuous. This may be true, but it is not normal. The body rids itself of this poisonous material through the kidneys, but the fact that it exists in high amounts in the urine indicates errors in diet. The presence of uric acid in the blood of gouty individuals is considered by many physicians as a primary disease that arises without extrinsic cause. However, this condition would not occur in anyone who lived healthfully. The extrinsic cause that results in high levels of uric acid lies in eating foods that are unsuitable. Flesh foods are main contributors but also consumption of alcohol is a major factor. These conditions must be corrected if health is to be restored.

6.1 The "Immune" Theory

Our system normally comprises various types of white blood cells and molecules made by those cells. These cells and molecules normally reside in the lymph tissues and bloodstream and migrate to certain areas when needed to perform their specialized duties (such as in inflammation as the result of an injury).

Most of these cells and compounds have now been identified in human joints actively afflicted with rheumatoid arthritis. They include monocytes, macrophages, neutrophils, etc. The scientists do not know why these cells congregate in the rheumatoid-diseased joint. The reason, however, is not so baffling when you realize that the body initiated an inflammatory process in its attempts to heal. All inflammatory processes are associated with the above-named white blood cells. It is their duty to engulf and destroy all foreign matter and "clean up" the area along with other important functions. The scientists speculate that it is these white blood cells that inflict disease but they admit that they do not know why or how they accomplish this matter. The truth is that these white blood cells do not inflict disease even though they are identified with this disease process. In fact, they are "helpers" in the healing process.

It is generally believed that neutrophils (white blood cells) produce proteases that destroy cartilage in the joint. This enzyme may destroy the cartilage eventually, but it is not the cause of the disease. This situation would not occur if the pH of the area were not too acid from excessive meat eating and sugar eating. About 1/6th of meat is composed of uric acid. The body cannot digest and utilize animal wastes. So it neutralizes these harmful acids with base materials, such as calcium. Calcium urates form and are deposited in joints or muscular tissue around the joints. Meanwhile, the joints are being destroyed by the leaching of minerals from the bones and calcium deposits form in the joints irritating the tissues resulting in inflammation, pain, and swelling.

Based on these erroneous conceptions of the immune system working against the body, various drugs are given to suppress the activities of these cells. Aspirin is given to suppress the inflammation but it also suppresses healing, the formation of prostaglandins that also play a role in healing, and many other

physiological functions.

Injectable gold is given to arthritis sufferers, but patients suffer itching, stomach discomfort, anemia, and platelet disorders. A drug called D-penicillamine results in bone marrow suppression or kidney disease in many people. Benoxaprofen was given to inhibit the migration of monocytes (a normal occurrence). This drug did not only offer no benefits but had to be removed from the market by Eli Lilly Company for an indefinite period of time because it had been linked with 61 deaths among elderly patients in Great Britain.

You cannot be poisoned into health nor can health be achieved through interference with normal, cellular activities. Once underlying causes are removed and corrected, the body will heal. If the disease has progressed to the point where the joints have become fused, complete recovery may not be achieved, but improvement will be made. Further joint destruction will be halted and general health will greatly improve.

7. What To Do If You Have Arthritis

7.1 The Fast

Dr. Shelton describes a case where a lady with arthritis, recovered completely after a fast: "Mrs. G. was forty-four years old. Her arthritis was of but a few months standing, but it was painful and crippled her movements. Mrs. G's physician could promise her nothing but temporary relief which was aspirin or cortisone for the rest of her life. He told her there would be a probable spreading and increase of pain. She journeyed to the United States from Canada and underwent a fast. The fast lasted only three weeks, but it freed her of all pain and inflammation and restored normal movement to her joints." After the fast she remained free of the pain and inflammation of arthritis.

The body has remarkable recuperative powers. The body's ability to heal can be enhanced if the remedies and the causes that have built the disease are removed. The body must be given an opportunity to eliminate its toxic accumulation by means of a fast and then given an opportunity to alter its blood chemistry by means of a change in the plan of eating.

During a fast, the chemistry of the body (especially its fluids and secretions) undergoes a rapid change and returns to a normal healthy state. Fasting relieves the pains of arthritis more effectively than drugs and does it without risk or harm. It is not because the fast itself did anything. Fasting did nothing. But it provided the best condition for the body to heal and repair itself. This is why you fast.

The duration of the fast in arthritis depends on individual circumstances and should only be undertaken under the personal supervision of one who is thoroughly familiar with the techniques of fasting.

Recovery from chronic arthritis is a slow process out of a state of ill health and into a state of biochemical normalcy and health. According to Dr. Shelton, recovery depends on many factors—age, weight, extent of the disease, its duration, degrees of joint destruction, the amount of ankylosis, previous habits of living and eating, the amount of nerve energy in reserve, the character of complications that exist (such as heart disease), the occupation, disposition and environment of the patient. All of these factors determine the extent of recovery possible and the rapidity with which recovery can take place.

While some joints may be permanently ankylosed, the fast can still result in improved health in all cases. A higher state of health will result overall.

7.2 After the Fast

After the fast you should try to implement a more healthful diet into your daily life. The best diet for all humans is one that consists of all raw fruits, vegetables, nuts and seeds, organically grown. On this diet, arthritis sufferers have had the most success in recovery and maintaining health thereafter. This is a diet that contains no harmful toxins that would create the conditions for any disease to exist. When eaten in correct combinations, there will be no fermentation or putrefaction that results in the presence of toxins in the body. These foods are easily digested, supply us with all nutrient needs, and will provide, the correct conditions for health.

You must keep in mind that the body always strives toward health and will always heal and repair itself even in seemingly hopeless cases when the proper conditions are provided.

Besides fasting, and proper diet, all of the other conditions must also be provided (proper rest and sleep, exercise, etc.).

8. Questions & Answers

Will elimination of nightshade fruits cure arthritis?

> The nightshade fruits (tomatoes, eggplants, peppers, and potatoes) will not cause arthritis and their elimination will not "cure" it. There are no cures. Adhering to a healthful lifestyle will enable the body to heal and this is the only road to health.

I read that vibrators are good for the relief of arthritis. Is this true?

> The federal government ruled that it is illegal to offer vibrators for the relief or prevention of arthritis or rheumatism. In spite of this fact, 14 out of 100 arthritics use a device of this kind. The machines have been proven ineffective. In some instances, where rest of the affected parts is desirable, use of a device may have harmful effects. Nevertheless, thousands are being sold annually to arthritics eager to grasp at any offer of relief. Do not be fooled into believing that any device will relieve arthritis.

Are liniments effective in treating arthritis?

> Liniments, ointments, and lotions are entirely ineffective in relieving arthritis. Anything outside of the human body has no ability to heal. These agents may be harmful if they are absorbed through the skin and they may aggravate the condition rather than help it.

I have rheumatoid arthritis in my hands and all the joints are very swollen and painful. My doctor told me to melt parafin wax with mineral oil and coat my hands with this mixture twice a day. Will this help my condition?

> No, this treatment is ineffective in relieving pain. Furthermore, it is very stressful for the arthritis sufferer and results in further enervation. Your hands are already extremely sensitive due to the inflammation in the joints. Placing them in hot wax will result in even more discomfort. Disregard this practice and try a more healthful lifestyle beginning with a fast. The results will be positive with no adverse effects.

Years ago I heard about "immune milk" as a remedy for arthritis. Can I still purchase this

product?

Several years ago "immune milk" was widely advertised as a remedy for arthritis. According to Dr. Ronald W. Lamond-Havers, medical director of the Arthritis and Rheumatism Foundation, "scientifically-controlled studies of the product show it has absolutely no effect on the disease."
The so-called "immune milk" allegedly gets its "immunity" to rheumatoid arthritis from antibodies produced in the udders of cows injected with streptococcus and staphylococcus vaccines. The victim of the disease, according to the theory, then gets his "immunity" or "cure" by drinking a quart of the "milk" a day

Dr. Lamont-Havers points out there there is no evidence that streptococci or any other agent directly causes rheumatoid arthritis, and that treating patients by injecting such vaccines was tried and discarded

Any product which promises "immunity" to arthritis or any disease is fooling the public into purchasing the product under false theories. Stay away from all such products and vaccines.

Will fasting "cure "arthritis?

This question is best answered by quoting Dr. Shelton from *The Science and Fine Art of Fasting*, he says:

"We do not-claim that fasting "cures" disease, but simply that it enables the organism to heal itself. What, then, does fasting do?

1. It gives the vital organs a complete rest.
2. It stops the intake of foods that decompose in the intestines and further poison the body.
3. It empties the digestive tract and disposes of putrefactive bacteria.
4. It gives the organs of elimination an opportunity to catch up with their work and promotes elimination.
5. It reestablishes normal physiological chemistry and normal secretions.
6. It promotes the breaking down and absorption of exudates, effusions, deposits, "diseased" tissues, and abnormal growths.
7. It restores a youthful condition of the cells and tissues and rejuvenates the body.
8. It permits the conservation and recanalization of energy.
9. It increases the powers of digestion and assimilation.
10. It clears and strengthens the mind.
11. It improves function throughout the body

Article #1: Why You Have Arthritis by Dr. Herbert M. Shelton

Years ago when a man or woman had pains and inflammation in the muscles and/or joints, the diagnosis was likely to have been rheumatism.

Rheumatism took many forms, such as inflammatory, muscular and joint rheumatism. In the lower back it may have been called lumbago. Rheumatism of the chest muscles received the name pleurodynia. Sometimes this was mistaken for pleurisy. Then there was the acute form that was known as rheumatic fever.

Today, the term rheumatic is not used so much. The "old disease" has been fragmented into arthritis, of which several varieties are listed: lumbago, bursitis, sciatica and other so-called diseases. Chronic rheumatism of the joints (rheumatoid arthritis) is said to sometimes follow a cold, acute rheumatism, tonsillitis, and to sometimes develop independently of these "diseases." It may develop in any joint in the body and slowly extend to other joints, but has a tendency to develop first in joints that have been injured.

In persons past forty, sprains and other injuries are sometimes followed by the development of arthritis. The joints don't heal perfectly but remain stiff and even painful, with the result that the limb is weakened or even crippled.

The reason for the failure of the injured joint to heal is that the individual is already toxemic and ripe for the development of arthritis. Such a development may receive the name *traumatic arthritis*. Arthritis is a frequent development in athletes whose activities place a great strain on their joints, although it is not likely that these strains do more than determine the location of the development. The eating excesses and indulgences for which some athletes are known are the more likely causes.

Arthritis may develop at any season of the year but is more often developed in the winter season, and cold seems to make the symptoms worse. The disease is much more prevalent in cold climates than in warm ones. However, there is no reason to think that climate, per se, is a cause of the disease. It is more probable that the inactivity of the indoor life, the lack of fresh air and the overeating of the richer foods that characterize winter living are the chief causes. It should not have to be repeated that any influence that produces enervation and checks excretion will contribute to cause.

All so-called rheumatic conditions were once attributed to the accumulation of uric acid within the body. There are those who still hold to this older theory. This acid is one of the end products of protein metabolism, but is unlikely that any one of the end products of metabolism (this is to say, any one of the wastes of the body) is solely responsible for the disease. There may be some deposit of uric acid crystals in the capillaries but this does not seem to be the cause of arthritic diseases.

The idea that arthritis and other "rheumatic" diseases are caused by the accumulation in the body of uric acid led to the idea that flesh eating causes or helps to cause such affections. The fact is that excessive starch and sugar eating seems to have more to do with the evolution of arthritis than does flesh eating. But we cannot lay such developments to any one habit of life or to any one article or one class of food. The total enervating mode of living and the total toxic load carried by the individual must be regarded as cause.

Fermentation in the stomach and intestines (indigestion) resulting from wrong combinations is perhaps more important as a factor in causing this condition than the food itself. In most, if not all, cases of arthritis there is a long history of indigestion preceding the development of the joint inflammation. (Inflammation of a joint is the meaning of the term arthritis.)

Food combinations that do not digest readily favor fermentation and putrefaction. If elimination is also checked as a result of an enervating mode of living, the toxins absorbed from the digestive tract tend to accumulate in the body. This results in the evolution of disease in line with the individual diathesis.

Indigestion, whether resulting from wrong combining or from any other cause, favors the evolution of serious disease. The liver and kidneys are constantly taxed beyond their limit in excreting the poisons that come from indigestion. It becomes impossible for them to keep the blood and tissues free of waste and the absorbed poisons. The resulting accumulation of toxins from the tissues and from the digestive tract cause disease.

While arthritis is frequent among athletes and physical laborers, a *lack* of exercise may also contribute to its causation. It is impossible to have normal health without adequately meeting the normal needs of life. A sedentary existence is itself a cause of a general lowering of the tone and functioning vigor of the body. The inactive person has sluggish circulation. This prevents normal tissue renewal. The ground is thus prepared for the development of disease.

Among the most common causes of indigestion are overeating, drinking with meals, eating when fatigued, eating immediately before engaging in heavy work, eating when emotionally stressed, eating between meals, lack of sleep and taking drugs. Among the common causes of enervation, a state that both checks excretion and impairs digestion are all drug habits—the coffee, tea, chocolate, alcohol, tobacco, antacid tablets, headache pills, sleeping pills, etc., and poor physical habits—overworking, excesses, oversunning, overbathing and all other indulgences. Overworked emotions are one of the main causes of enervation.

It is said that "rheumatism" almost always weakens the heart. Great numbers of cases of so-called "rheumatic heart" are credited to "rheumatic fever" in infancy and early childhood. It has been known for over eighty years that the salicylates (aspirin) damage the heart. Yet when this drug is freely given in so-called rheumatic fever and in arthritis and the heart is damaged, the effects of the drug are ignored. It is doubtful if heart damage will occur in cases not treated with drugs.

Many years ago Sir William Osier said in his *Principles and Practices of Medicine*, "The salicylates (a class of drugs which we have previously pointed out is employed in almost all treatment of the so-called rheumatic diseases) are useless." They are employed to relieve pain and for no other purpose. The patient pays a fearful price for a brief respite from pain, for it is necessary to repeat the dose at intervals and to increase both the frequency and the size of dose as the use of the drug discontinued.

It is freely admitted by the profession (an admission that even the vendors of patent medicines keep echoing) that there is no *cure* for arthritis. All the drugs employed in the treatment of arthritic sufferers are employed as palliatives. Cortisone has replaced the old standby of yesteryear—potassium iodide. It may be less damaging than the older drug but is no longer thought of as anything more than palliative. It has very harmful "side effects" and will sooner or later be abandoned.

The climate cure, the Turkish bath *cure*, the hot springs and mineral springs *cure*, massage, etc., have been and are popular in treating arthritis. They have no other apparent benefits than that of temporarily palliating symptoms. As palliatives they are less damaging than drugs. This is the best that can be said of them. The sweat baths, hot baths, prolonged baths, massage and similar treatments add to the enervation of the patient and help to prolong the disease.

Nothing short of *the removal and correction of the causes of enervation* assures a re-establishment of health. Rest is the means of restoring normal nerve energy—rest of body and mind. Physiological rest (fasting) is the surest, best and most satisfactory means of promoting the excretion of accumulated toxins. A corrected mode of living after the fast will prevent a return of the toxemic state and promote the evolution of good health. The arthritic who as a remedy mentality will search in vain for a remedy that will restore him to health; the intelligent individual may easily live himself into good health. Health is an evolution of healthful living; it is not the product of "cures."

Chronic rheumatoid arthritis is a state from which recovery (full and lasting recovery) is easily possible if a Hygienic program is fitted to the individual's needs before irreparable damages have occurred in the joint tissues. Even apparently hopeless cases make full recovery. There are, in many advanced cases, tissue changes that cannot be undone. This makes it all the more important that Hygiene be adopted early.

Article #2: Arthritis by Dr. Robert R. Gross

Arthritis is a "disease" caused principally by impaired metabolism and toxemia (poisons in the blood and tissues), acid pattern is eventually developed in the joints by the type of food eaten and the faulty habits experienced. A fibrositis (fiber inflammation) followed by a hardening of tissues surrounding the joint occurs. All the structures composing a joint-articular cartilage, synovial membrane, synovial fluid, articular capsule, ligaments, tendons, and muscle endings may become involved. Blood circulation to the parts is obstructed and calcium tends to infiltrate and precipitate in any of the areas. Mobility is reduced, and, ultimately, the joints may become locked (ankylosis) and deformed.

Arthritis is classified by physicians into different forms: osteoarthritis, rheumatoid arthritis, gouty arthritis and rheumatic fever arthritis. All these afflictions are basically the same type in the joint. The cause is the same (toxemia) and the care is the same. This abnormal state exemplifies typically the Natural Hygienic axiom of the unity of disease.

Pathology texts describe osteoarthritis as the hypertrophic form (joint enlargement) and rheumatoid arthritis as the atrophic form (wasting). I have seen innumerable cases wherein both forms were combined in the same joint. As a matter of fact, it is impossible that one form exist as an entity unto itself without involving some joint disturbance attributed to the other.

Medicine likes to classify health deviations down to impractical differences whereas all derangements are practically the same. The use of "medical jargon," descriptive Latin and Greek names, and utilization of imposing-looking diagnostic instruments and laboratory procedures lend an aura of "science" to the practice of drugging. These adornments and embelishments are so much "eyewash" and serve to detract from the actual cause-and-effect relationship of all disease processes and their care.

Cause of Arthritis

The inflammation, pain and stiffness, lime deposits, deformity, ultimate destruction of the normal joint structures, and "locking" of the joint all stem from a form of life destructive to general health. Poor eating habits; smoking; consumption of alcohol and coffee; insufficient sleep, sunshine, fresh air and exercise; emotional intemperance; use of medicine and pills and other factors cause nutritional impairment, intestinal poisoning and chronic toxemia with arthritis.

The results of drugging and therapeutic abuses have made arthritis a hopeless condition. There is tremendously more harm, suffering, inconvenience and abuse caused by the treatment employed than by the arthritis itself. The evils of cortisone: ACTH, phenylbutazone, aspirin, gold salts and x-ray radiation have made hopeless cripples of mild arthritic sufferers. *Persistence in ignoring causes of disease and refusal to remove them is the greatest evil of medical treatment.*

Hygienic Care of Arthritis

Arthritis is not the hopeless condition that medical men make of it. It must not be permitted to advance beyond the possibility of vital redemption before Natural Hygienic care be instituted. In all cases that have not advanced to joint destruction and ankylosis, recovery may be experienced to varied degrees if the sufferer will forego the destructive way of life causing the derangement. He must be willing to adopt, and persist in, a regime from which normal health will evolve.

I have had innumerable arthritics recover normal joint function through fasting followed by a vegetable, fruit and raw nut regime. The fast promotes detoxification of the body, and marked improvement, both in general and local conditions, follows. Relief from excruciating pain is gained within only a few days after the fast is instituted. Marked reduction of the swelling and enlargement of the joints, restoration of motion in the stiffened parts and great comfort and ease are immediately enjoyed.

Some cases require two or more fasts before accumulated poisons are ejected and full recovery is accomplished. In advanced cases one or two years may be required before normal joint movement is obtained. The patient must be persistent and cooperative with nature's infinite wisdom in the self-healing powers of the body. If he will do this, he will not only recover health but he will retain good health.

Faulty habits of living dangerously reduce nerve functioning power and maintain it at a level inconsistent with high-grade health. This substandard functioning power is the antecedent of all disease irrespective of by what name it goes and no matter what complicating causes may be superadded to them. The body does not possess unlimited power of recuperation, thus, diseased states in any degree should be immediately subjected to Natural Hygienic care.

Article #3: Well! You Wanted to Know! by V. V. Vetrano, B.S., D.C., M.D.

How does rheumatoid arthritis differ from other arthritis and what can be done about it?

Arthritis is a general term referring to any inflammatory disease involving a joint. There are many different types of arthritis, their names being based upon different things, such as whether or not it is acute or chronic, its cause, or etiology, the specific joints involved, etc.

Suppurative arthritis is a condition where the inflammation is associated with the formation of pus. It is thought that this type of arthritis is due to direct bacterial invasion, sometimes causing the white blood cell count to reach 200,000 mm3. It is usually limited to one joint. As the process advances, this type of arthritis can destroy the structures of the joint just as badly as does rheumatoid arthritis. The only difference is that in rheumatoid arthritis multiple joints are involved and pus does not form.

Tuberculous arthritis sometimes develops as a complication of pulmonary tuberculosis. This type of arthritis is even more destructive than suppurative arthritis and frequently normal tissues of the joint are replaced with scar (fibrous) tissue. Calcification (ankylosis) of the joint also takes place.

Rheumatic fever is always associated with a type of migratory arthritis. This type of arthritis usually subsides without injury to the joint. It is well known, however, that the heart is often damaged. It is the belief of Hygienists, however, that the heart damage is probably due to the drugs used to treat the problem rather than bacteria or the disease.

In arthritis associated with gout, which is a systemic disorder of uric acid metabolism, urates will be deposited in and about the joints. This kind of arthritis leads to extensive destruction of the articular surfaces. It is very chronic and extremely painful. It is so severe in some people that the least movement or just the touch, of a sheet will send the sick one into agonizing pains.

Rheumatoid arthritis is a systemic inflammatory disease of *unknown* etiology according to physicians. However, the etiology is not unknown to Hygienists. Being systemic, all the organs of the body are affected, but the outstanding feature is the progressive deformity of the involved joints. Usually more than one joint is diseased and it is symmetrical; that is, if

one hip is involved, the other usually is also. It usually begins in the small joints of the hands and feet, but it commonly affects the wrists, elbows, ankles, hips, knees and spine. The synovial membrane (the membrane which secretes the joint fluid) becomes inflamed and develops into a mass of swollen and inflamed tissue with tags protruding out into the joint itself. It becomes what is known as a pannus and it is thought that this is what eventually destroys the articular cartilage. It also extends to the joint capsule which surrounds the joint and the supporting ligaments and weakens the entire joint. It eventually destroys the articular cartilage, then the bone. In the latter stages of the disease, the articular surface is eroded and the joint space is obliterated. In the final stages of rheumatoid arthritis, adhesions of fibrous tissue or bony ankylosis prevent the joint from moving. Complete confinement to the wheel chair is the final outcome of those who do not learn about Hygiene before this destruction takes place.

Osteoporosis is different in that it occurs principally in weight bearing joints, and is very slowly progressive. The current thought is that the condition is essentially a "wear and tear" or aging phenomenon and should not be called arthritis because it is not basically an inflammation. Pathologists who desire to be technically correct call the problem degenerative joint disease. Degenerative joint disease may appear in younger people when the joint has been injured.

All types of arthritis develop from chronic toxemia. Even with an arthritic tendency one does not necessarily have to develop the disease. A correct mode of living will prevent the development of the disease even in those predisposed to it. Physicians are still ignorant of the cause as is stressed in the following quotation: "It is depressing to relate again, as with so many diseases, that the cause of osteoarthritis is unknown." It is thought that laxity or instability of the supporting tissues of a joint, whether because of previous injury or aging, predisposes one to osteoarthritis. Trauma, slowing of the body's ability to repair as one ages, and anatomical and biochemical changes are all given as possible causes when the real cause is a biochemical perversion from wrong ways of living. As long as the tissues of the joint are normal and all the metabolic wastes are carried away as fast as they are formed, the joint will repair itself even of gross and microtraumas of long years standing.

The primary difference between the two great types of arthritis, rheumatoid and osteo, is that the joints most commonly affected in osteoarthritis are those most active, such as the articulations of the vertebrae, hips, knees, and the distal interphalangeal joints of the fingers. The wrists, elbows, and shoulders and the proximal interphalangeal joints are seldom involved.

Actually, osteoarthritis differs greatly from rheumatoid arthritis in almost every way. It is equally common in both sexes, however, and it develops most often later in life. In osteoarthritis, "there is no evidence of a toxic factor; the large joints are commonly involved, often only one joint; there is no true ankylosis." In osteoarthritis, movement is limited by bony outgrowths, but the two bones never become joined together (ankylosis) as in rheumatoid arthritis. Women especially are prone to the development of Heberden's nodes. I'm sure you have all seen the knobby hands of some older women, especially the bumps on the last joint of the fingers. These are known as Heberden's nodes and they arise because of degeneration of the tissues around the joint after which they are subsequently ossified.

Article #4: How to Deal With Bursitis by Dr. Herbert M. Shelton

At intervals, *U.S. News and World Report*, which conceives it a duty to the public to keep them informed on the "progress" of medical mischievousness, has one of its reporters interview some little *gutta percha* god of medicine on some subject and give the results to its readers. In its issue of January 11, 1960, it published an interview with Joseph J. Bunim, M.D., of the National Institute of Health, under the misleading title: "Bursitis: Latest on its Cause and Cure." It declares Bunim to be one of the "nation's top notch authorities on rheumatic diseases," a distinction he seems to have acquired by being ignorant of the "diseases" in which he has specialized. His "latest" is old stuff that has been to the cleaners.

Our grandfathers used to suffer with what was called rheumatism. Rheumatism was a blanket term that covered a wide variety of pains and inflammations in various parts of the body. They had "muscular rheumatism," "articular rheumatism," "sciatica," "lumbago," "pleurodynia," and other "forms" of rheumatism. Nobody has rheumatism today, for the old "disease" has been run through a food chopper and so fragmentized that today we have a whole variety of "diseases" as substitutes for rheumatism. We have "neuralgia," "neuritis," "sciatica" (which is a neuritis), "fibrosis," "arthritis," "myositis" "bursitis," etc. Just as *arthritis* may develop in any movable joint and *neuritis* may develop along the course of any nerve, so *fibrositis* may develop in any fibrous tissue, *myositis* may develop in any muscular tissue and *bursitis* may develop in any bursa. "Itis" is a little Greek word meaning inflammation, which is used as-a suffix. When added to the name of an organ or part, it indicates inflammation in that organ or part. Thus, all of these separate *diseases*, in many different locations are but local inflammations. Their names do not seem to be important.

I quote the following words from a standard textbook on the practice of medicine: "The etiology (cause) is unknown." This is the gist of the statements concerning cause that one finds in all of the standard texts and reference works dealing with these so-called diseases. Sometimes we get such stupidities as "many patients notice a direct relation between exacerbations of muscular symptoms and infections of the upper respiratory tract, influenza, exposure to damp and cold weather, fatigue and overexertion." The authors of these ponderous works devote much attention to "diagnosis" and "differential diagnosis" and recommend measures of treatment that, at their best, are merely palliative; at their worst, are more harmful than the cause of the disease for which they are administered. Never do they suggest removing cause—how could they, when they confess ignorance of cause? They advise protecting these patients against respiratory *infections*, but neglect to explain how this is to be done.

Bursitis is one of these "rheumatic diseases" that have taken the place of the rheumatism of our grandfathers. It is inflammation of a bursa. A bursa is a small sac interposed between movable parts for purposes of lubrication. Bunim explains that a bursa is "a small sac containing fluid, which is usually situated between a tendon and the bone over which the tendon glides." He says that "tennis elbow" and "housemaid's knee" are good examples of bursitis. He differentiates bursitis from arthritis by saying that arthritis is inflammation of the intrinsic structure of a joint, such as the lining of the joint, or the cartilage or the capsule, whereas, the bursa lies outside of the joint and is not part of the joint. This means that, while bursitis is contiguous to the joint, and often seems to be in the joint, it is only close to the joint.

When asked if "we" are getting closer to an answer to bursitis, Bunim declared that "we" know much more about bursitis as a result of research which has been done on changes in the body's tissues in the areas of bursitis. This only means that they have made more extensive studies of local pathology, not that they know any more about inflammation now than they did ten years ago. He says that they hope to learn more about the process which results in bursitis and adds that during the past ten years more research has been done on this subject than during the previous century. What he failed to add is that, with all' this research, they are still ignorant of the cause of bursitis. Injury and overstrain and aging are about' the only "causes" they recognize.

"There is no cure, as yet," he says, but he states that there are several measures that can be utilized for relief of pain. Every time we read a medical treatise on any so-called disease, we run up against the same state of affairs. "There is no cure," but we can provide evanescent "relief." Medicine is a system of spectacular palliation. When asked if he thought that medical research will find "an answer to bursitis," Dr. Bunim stated that he is not sure that they will find an immediate answer, but "we certainly hope to learn more about the process which results in bursitis from a greater knowledge of the chemistry and metabolism of connective tissue, because the basic trouble is degeneration of connective tissue." There seems to me to be a note of pessimism and doubt in that answer. There is also the fallacy that the "basic trouble" is the end point of the process. Tissue degeneration is not cause. It is effect—long-range effect.

Dr. Bunim says that "since we do not yet have means for eliminating the cause" they cannot *cure* bursitis. So they treat the local area with X rays, with surgery, apply heat, administer aspirin or other analgesic (pain killer or patient-killer, depending on the point of view), but they cannot provide more than temporary relief by such measures. There is a lot of guess work, as he frankly admits, connected with the physician's care of the patient with bursitis and they guess about how the "relief" they afford is accomplished. He is sure that the steroids (probably ACTH and cortisone) that have been recently employed in the treatment of arthritis may be used in bursitis, but they are not to be given orally. They must be injected at the site of the inflammation. If they are no more successful in bursitis than in arthritis, one can only wonder why they should be used.

When asked: "Is there research aimed at developing drugs specifically for bursitis?" he replied: "There is. Research for new drugs is continuing all the time in hopes of finding a drug which would be as effective or as potent an agent as the steroids which are now in use, but would have less toxic effects or would not have the potential hazards and the undesirable side effects that the current steroids have."

That about sums it up. They are searching for a drug. The medical mind can think only in terms of drugs. They must have a drug; they hope to find one that will be effective as a means of "relief" or *cure* and will not have side effects, will not be poisonous. They are forever engaged in searching for that which does not exist. Whether it is bursitis, arthritis, the common cold, pneumonia or any other so-called disease, they are searching for a drug. For twenty-five hundred years they have been searching for drug;. They have found and used hundreds of thousands of thorn. They have all proved to be toxic. They have been hazards. They have all produced undesirable side effects. But they have never lost hope. They are still searching for a poison that is not a poison.

The remedy for bursitis is so simple that a child may apply it with far greater success than the learned medical profession and all of its "top-notch authorities" now apply their doubtful means of palliation. When once it is learned that toxemia is the basic cause of tissue inflammation, that injuries heal quickly in the nontoxemic, that recovery from overexertion is rapid when the individual is not toxic, that fatigue is speedily recovered from by the man or woman of pure blood, and that no inflammatory condition lasts beyond the removal of its cause, it will be readily seen that the remedy for bursitis is the simple one of detoxification. Rest of the injured and inflamed part is essential; often rest of the whole body is important. Certainly, if one is suffering from fatigue, the only means of recuperation is rest. If one has overexerted a part, it needs rest. If there is inflammation in a part of the body, it should be set at rest. This is often all that is required for recovery from slight cases of bursitis. A fast will be needed in the more severe cases. If the pain is great, heat to the painful area will provide relief. No drugs should ever be employed for relief of pain.

Bursitis develops in the toxemic; it does not evolve in the man of pure blood. An injury will result in inflammation in both the toxemic and the nontoxemic, but in the nontoxemic healing is rapid; in the toxemic it is slow and often drawn out. Indeed, if the toxemia is not eliminated, it may not occur at all. Bunim says that the physician knows that sooner or later the bursitis will come to a natural termination, that it is a self-limited condition. This simply means that recovery is spontaneous and that the treatments of the physician have no office in producing the recovery, What he fails to say is that the meddling of the physician-often prolongs the trouble for weeks and months. All systems of cure ride to glory on the self-healing powers of the body, which is all that is inferred in the statement that a *disease* is self-limited.

Bunim discusses calcium deposits in bursitis and also abscess formation in some cases. He also describes adhesions and more or less permanent limitation of movement of the joint. None of this need occur even in the most severe cases if fasting is immediately instituted. If the fast is resorted to at a later date, this is to say, after calcium deposits have occurred, the fast will result in the absorption and removal of the calcium. Bunim teaches at Johns Hopkins and Georgetown Universities, is on the staff of the Walter Reed Hospital, edits the *Bulletin on Rheumatic Diseases*, "pioneered" the use of synthetic cortisone-like drugs, is clinical director of the Government's National Institute of Arthritis and Metabolic Diseases, "where he directs research and evaluates treatments in arthritis," but he has not and he will not evaluate any common sense methods of care of arthritis or bursitis. He is wedded to drugs and is incapable of conceiving of any care that does not involve poisoning the patient. He will not do any research into the subject of fasting and he will not evaluate it. Intelligent readers will not be misled by his self-imposed blindness.